

Approved, SCAO

Original - Prisoner
1st copy - Parole board
2nd copy - Prosecutor/Victim

3rd copy - Prison/Facility
4th copy - Court (for proof from prison/facility)
5th copy - Court (for proof from prosecutor/victim)

**STATE OF MICHIGAN
JUDICIAL CIRCUIT
COUNTY**

**NOTICE TO PRISONER ON
APPLICATION FOR LEAVE TO APPEAL
DECISION OF PAROLE BOARD**

**CIRCUIT CASE NO:
APPEAL CASE NO:
JUDGE:**

Court address

Court telephone no.

Appellant
<input type="checkbox"/> THE PEOPLE OF THE STATE OF MICHIGAN
<input type="checkbox"/> _____

v

Prisoner's name, address, and inmate no. (if known)	Appellee

NOTE: This form is required under MCR 7.104(D)(2)(c). If the appropriate language is included in the application for leave to appeal, this form does not need to be used.

TO THE PRISONER:

1. An application for leave to appeal a decision to grant parole is being filed with the circuit court. (attached)
2. You are not required to respond to the attached application. If you wish to respond to the application for leave to appeal you may respond yourself or hire an attorney to respond for you.
3. If an order of parole is issued under MCL 791.236; MSA 28.2306 before the appellate proceedings are completed, a stay may be granted in the manner provided by MCR 7.105(G), except that no bond is required.

TO THE PRISON/FACILITY: You are required to personally serve this notice, the application for leave to appeal, and any supporting documents on the prisoner named above. After service on the prisoner, you must complete the proof of service below and file it with the clerk of the court.

PROOF OF SERVICE

I certify that on this date I served copies of this notice, the application for leave to appeal and any supporting documents by registered or certified mail, return receipt requested on the parole board, the prosecutor (if appropriate), and on the facility where the prisoner is incarcerated.

Date

Signature of applicant/attorney

Note: Attach copy(ies) of the return receipt(s) from the parole board and the prosecutor (when appropriate) and file a copy of this proof of service with the clerk of the court.

PROOF OF SERVICE ON PRISONER

I certify that on this date I personally served this notice, the application for leave to appeal and any supporting documents on the prisoner named above.

Date

Signature of prison official

MCR 7.104(D)(2)